

Ultimate Roster



and Cultural Services

Library Recreation

Athletics

Please print clearly or ty	print clearly or type the following information:			
Team Name				
Manager's Name				
Mailing AddressStreet Nu		City.	7:	
Home Phone	XXX 1 D1	City E-Mail Address	Zip	
League: Men's	Women's	Coed		

RELEASE FROM LIABILITY AGREEMENT

All players must read the following and sign below:

I hereby agree to adhere to the following:

- . Each team is responsible for its own insurance. The City of Eugene does not provide medical insurance coverage for participants.
- 2. I agree to abide by the rules and regulations as set forth by the City of Eugene Library, Recreation and Cultural Services Department (LRCS). The LRCS Athletics Program will have ultimate decision-making authority on any matters that might arise concerning any one of the leagues. I understand that my failure to abide by any rules and regulations can jeopardize my team's participation in this league.
- 3. In consideration for the right to participate in this activity, I agree to indemnify and hold harmless the City of Eugene and its agents for any claim for injury or damage suffered by myself or others as a result of my participation in this activity. I understand that there are inherent risks in this activity and that training and conditioning are necessary. I agree to assume those risks on behalf of myself.

I have read and understand the above agreement:

PLAYERS MUST SIGN NAME		MINIMUM OF 10 PLAYERS (6 Men, 4 Women)	
PLAYER'S NAME	PLAYER'S SIGNATURE	ADDRESS/ZIP	PHONE
1.			
Age:	Exp. Rating***	E-mail Address	
2.			
Age:	Exp. Rating***	E-Mail Address	
3.			
Age:	Exp. Rating***	E-Mail Address	
4.			
Age:	Exp. Rating***	E-Mail Address	
5.			
Age:	Exp. Rating***	E-Mail Address	
6.			
Age:	Exp. Rating***	E-Mail Address	
7.			
Age:	Exp. Rating***	E-Mail Address	
8.			
Age:	Exp. Rating***	E-Mail Address	
9.			
Age:	Exp. Rating***	E-Mail Address	
10.			
Age:	Exp. Rating***	E-Mail Address	_

See reverse side for additional player's signatures.

***EXPERIENCE RATING:

- 0 NEVER PLAYED ORGANIZED ULTIMATE, BEGINNER SKILLS
- 1 PLAYED SOME ULTIMATE IN PAST, SOME SKILLS
- 2 PLAYED 2+ SEASONS OF RECREATIONAL ULTIMATE, AVERAGE SKILLS
- 3 PLAYED OVER 2 YEARS OF RECREATIONAL ULTIMATE, ABOVE AVERAGE SKILLS
- 4 EXTENSIVE COMPETITIVE ULTIMATE EXPERIENCE, HIGHLY SKILLED

Date	Number	Amount Paid	_ INT		

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11.			
Age:	Exp. Rating***	E-mail Address	
12.			
Age:	Exp. Rating***	E-Mail Address	
13.			
Age:	Exp. Rating***	E-Mail Address	
14.			
Age:	Exp. Rating***	E-Mail Address	
15.			
Age:	Exp. Rating***	E-Mail Address	
16.			
Age:	Exp. Rating***	E-Mail Address	
17.			
Age:	Exp. Rating***	E-Mail Address	
18.			
Age:	Exp. Rating***	E-Mail Address	
19.			
Age:	Exp. Rating***	E-Mail Address	
20.			
Age:	Exp. Rating***	E-Mail Address	

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